MEDICAL SOCIETY OF THE

MEDICAL AND SUZ

FOR 1



EXPLANATIONS AND DIRECTIONS.

According to the arrangement of the accompanying blanks, it is intended that they shall be a faithful monthly record of the Diseases, Accidents, &c., occurring in the practice of the Physician and Surgeon in whose hands they may be placed.

In the registration of observations which may be made in reference to medical or surgical cases, it is recommended that the various items of information, as soon as they are obtained, be immediately noted down, in order to secure accuracy in the statistics, in the appropriate columns of the blanks, according as they are designated by their headings. The name of the disease, character of the accident, &c., must be written as distinctly as possible, and it is requested that the classified nomenclature herewith appended, be consulted as a guide in the registrations. It is desirable that they should be accompanied by remarks or explanatory notes from each individual observer, stating in particular the pathological indications afforded by post-mortem examinations; also, any peculiarities that may have manifested themselves during the progress of the disease, either in respect to epidemical or endemical influences, or the marked effects of remedial agents. Accurate diagnosis should characterize every registration. The column assigned to the "Initials of Patient," has been added merely for the convenience of the Physician keeping the registration as a guide in recalling the circumstances of the case. In recording the age of the patient attach simply the letters Y. M. or D. for years, months or days, to the figure designating the age, omitting fractional portions of each, whenever they occur; and under the headings Sex, Color, Civil Condition, Temperate, Intemperate, Termination, Result of Accidents, Result of Anaesthesia, the simple insertion of the figure 1 will be all that is necessary. The columns devoted to the registration of Occupation, Place of Birth, &c., sufficiently explain themselves. In the "Obstetrical Record," under the head of Presentations, it is requested that the subjoined abreviations be employed.* It is expected that the blank spaces left for registration of cases, will be amply sufficient as a general rule; but if in any case they should fall short, an extra copy of these blanks may be obtained by application to the Chairman of the undersigned Committee.

The monthly registrations for the year ending on the 31st of December, must be transmitted to the Committee on Medical and Surgical Statistics, who will arrange an accurate digest of all the registrations sent them, and present the same at the annual meeting of the State Medical Society. Every statistical table received, will be carefully preserved and deposited with the Secretary of the State Society, from whom it may be obtained by the respective Registrar. It will be observed that the system of registration adopted for 1858, has been somewhat modified in the present blanks, and it is to be hoped that it will be more acceptable to the profession and effective in its operation.

J. G. ORTON, BINGHAMTON, N. Y. C. B. COVENTRY, UTICA, N. Y. M. F. COGSWELL, ALBANY, N. Y.

Com. on Medical and Surgical Statistics.

NOMENCLATURE OF DISEASES,

CLASSIFIED FOR S ATISTICAL PURPOSES.

73. Hip, diseases of. Endemic and Contagious Diseases. IV. ORGANS OF RESPIRATION 74. Spine, diseases of. I. ZYMOTIC OR EPIDEMIC. 35. Asthma. X. INTEGUMENTARY SYSTEM 1. Cholera. 36. Bronchitis. 37. Tuberculosis. 75. Purpura. 2. Cholera Infantum. 38. Hydrothorax. 3. Croup-Spasmodic. 76. Skin, diseases of. Membranous. 39. Laryngitis. XI. OLD AGE. 40. Pleurisy. 4. Diarrhœa. 77. Old Age, death from. 41. Pneumonia. 5. Dysentery. 42. Quinsy. 6. Erysipelas. XII. EXTERNAL CAUSES. 43. Organs, &c., diseases of. 7. Fever-Intermittent. 78. Drowned. Remittent. 79. Burns and Scalds, death from. V. ORGANS OF CIRCULATION. Enteric or Typhoid. 80. Frozen, death from. 44. Aneurism. Typhus. 81. Glanders. 45. Pericarditis. 8. Whooping Cough. 82. Heat, death from. 46. Organs, &c., diseases of. 9. Influenza. 83. Hydrophobia. VI. OF THE DIGESTIVE ORGANS. 10. Measles. 84. Intemperance. 11. Scarlatina-Simplex. 47. Ascites. 85. Lightning. Auginosa. 48. Dyspepsia. 86. Malpractice. Maligna. 49. Enteritis. 87. Poisoned. 12. Small Pox. 50. Gastritis. 88. Strangulated. 13. Syphilis. 51. Hernia. 89. Starvation. 14. Thrush. 52. Intussusception. 90. Suicide. 53. Peritonitis. 91. Still Born. Of Uncertain or General List. 54. Teething. 92. Wounds-Gun Shot, &c. II. SPORADIO DISEASES. 55. Ulceration. 93. Amputations-15. Atrophy. 56. Worms. Upper Extremity. 16. Cancer. 57. Organs, &c., diseases of. Lower Extremity. 17. Debility. 58. Pancreas, diseases of. At the Joint. 18. Dropsy. 59. Hepatitis. Beyond the Joint. 19. Gout. 94. Fractures-20. Hemorrhage. 61. Liver, diseases of. Upper Extremity. 21. Malformation. 62. Spleen, diseases of. Lower Extremity. 22. Scrofula. VII. OF THE URINARY ORGANS. Deformed. 23. Sudden Death, cause unknown. 63. Diabetes. Not Deformed. III. OF THE NERVOUS SYSTEM. 64. Systitis. 95. Dislocations-65. Calculi. 24. Apoplexy. Upper Extremity. 66. Nephritis. 25. Cephalitis. Lower Extremity. 26. Chorea. 67. Organs, &c., diseases of. Reduced. 27. Convulsions. VIII. ORGANS OF GENERATION. 28. Delirium Tremens. 68. Puerperal Fever. 96. Anaesthesia-29. Epilepsy. 69. Rupture of Uterus. By Chloroform. 30. Hydrocephalus. 70. Organs, &c., diseases of. By Ether. IX. ORGANS OF LOCOMOTION. By Amylene. 32. Paralysis. Ill effects from. 71. Rheumatism. 33. Tetanus. Death caused by. 72. Joints, &c., diseases of. 34. Brain, diseases of.

*OBSTETRICAL RECORD.—Under the head of Presentations use the following Abbreviations:—

For the VertexLeft Occipito-Iliac,	L. O. I.
Right Occipito-Iliac,	R. O. I.
Occipito-Pubic	O. P.
Occipito-Sacral,	0. 8.
FaceTo the Right Side,	F. R.
Left Side,	F. L.
ShoulderRight Shoulder, Back Anterior,	R. S. B. A.
Left Shoulder, Back Anterior,	L. S. B. A.
Right Shoulder, Back Posterior,	R. S. B. P.
Left Shoulder, Back Posterior,	L. S. B. P.
Pelvis.—Back to the Left	P. B. L.
Back to the Right,	P. B. R.
Back to the Anterior,	P. B. A.
Back to the Posterior,	P. B. P.

QWA JADIQUE

From the County of.

__for the Month of_

1859.

DISEASES, ACCIDENTS, &c. DATE OF PATIENT DATE OF PATIENT AGE. SEX. COLOR. CIVIL CONDITION. DATE OF BIRTIL. Singlet Married. Widowed OCCUPATION. PLACE OF BIRTIL. Singlet Married. Widowed Disease. Recov'd. Died.

Registered by

M. D., Residence,__

-													-				
	RE	SULT OF	ACCIDEN	TS.	RESULT	OF ANAES	THESIA.			OB	STETRICA	L RECOI	RD.				
	Deform'd	Not Deform'd	Reduced.	Not Reduced.	Success-	Effects.	Death.	No. of Pregu'cy	Age of Patient.	Presen-	Sex of Child.	Hours in Labor.	Natural.	Artificial.	Ergot Used?		REMARKS AND EXPLANATORY NOTES:
-	-	-		-				-				-				-	

1859. _for the Month of__ SEX. COLOR. TERMINATION. CIVIL CONDITION. DATE OF ATTACK. PATIENT. AGE. DISEASES, ACCIDENTS, &c. PLACE OF BIRTH. OCCUPATION. Male. Female. White. Black. Recov'd. Died. Single! Married. Widowed

From the County of___

Registered by...

M. D., Residence.

11	RESULT	OR LOCK	Drivino.	Unnous	T OF ANAF	contract (0		OR	STETRIC	AL RECOI	SD			
	Deformed Deform			Terso di				Age of Patient.					Artificial	Ergot Used?	REMARKS AND EXPLANATORY NOTES:
11			-	-0					1	-	-				

From the County of_

for the Month of

1859.

DISEASES, ACCIDENTS, &c. DATE OF PATIENT. AGE. Male. Female. White. Black. Singlet Married. Widowed OCCUPATION. PLACE OF BIRTIL.

Registered by

M. D., Residence,_

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1	RESULT OF ACCIDENTS.	RESULT OF ANAESTHESIA.	OBSTETRICAL RECORD.	
			No of Age of Presen Sex of Lin. Non-Arthenia Ergot Pregn'ey Patient tailon. Chad fait. Non-Arthenia Used?	REMARKS AND EXPLANATORY NOTES.

From the County of

for the Month of

..1859.

RESULT OF ACCIDENTS.	RESULT OF ANAESTHESIA.	OBSTETRICAL RECORD	1	
Deform'd Not Deform'd Reduced Raduced	Success III Death.	No of Age of Present Sex of Room 1 No d. As	nead Ergot	REMARKS AND EXPLANATORY NOTES.
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From the County of.

for the Month of_

1859.

DISEASES ACCIDENTS & Left of Affice Will Made Female Winte Black Single Married Willowed OCCUPATION. PLACE OF BIRCH 2 1 Disease. Record Died

Registered by

M. D., Residence,_

RESULT OF ACCIDENTS.	RESULT OF ANAESTHESIA.	OBST	PETRICAL RECORD.		
Deform'd Not Deform'd Wedneed Not Reduced	Success- III Death.	No of Age of Presen- Pregu'cy Patient tation.	Sex of Bon Child Date	L Arthend, Ergot Used	REMARKS AND EXPLANATORY NOTES.
	d		- 1 -		A

-	RESULT OF ACCIDENTS.	RESULT OF 2	ANAESTHESIA.	OI	BSTETRICAL RECO	DRD.		
1	Deform'd Not Not Reduced Reduced	Success-	Ill Death.	No. of Age of Presen- Pregn'ey Patient tation.	Sex of Hore	North Art fields	Ergot Used?	REMARKS AND EXPLANATORY NOTES.
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From the County of.

for the Month of ______1859.

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	INTENIS	SEX.	COLOR.	CIVIL CONDITION '			N. C. Avenue	TERMINATION
DISEASES, ACCIDENTS, &c	TILLY B BALLY AGE .	Male. Female	Winte Black	Single Married Widowed	OCCUPATION.	PLACE OF BIRTH		e. Recov'd Died
						1	1	

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1	RESULT OF ACCIDENTS.	RESULT OF ANAESTHESIA.	OBSTETRICAL RECORD	
	Deform'd Not Not Reduced. Roduced	Success- fil Death.	No of Age of Present Sex of How a No odd Artificial Ergot tation. Chall Light No odd Artificial Ergot Light	RUMARKS AND EXPLANATORY NOTES.
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From the County of

for the Month of

...1859.

DISEASES, ACCIDENTS, &C. Dette of INITials SEX COLOR. CIVIL CONDITION.

DISEASES, ACCIDENTS, &C. Dette of INITials Agriculture of Initial Condition of Initi

-	RESULT OF ACCIDENTS.	RESULT OF ANAESTHESIA.	OBSTETRICAL RECORD	
١	Deform'd Not Reduced Not Reduced	Success- III Death.	No of Age of Preven- Pregn'cy Patient tailon. Child Lab. Not Archevit. Ergot Used?	REMARKS AND EXPLANATORY NOTES.
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11	- Commercial Commercia		OD CONTROLLE DISCOUNT	
ı	***************************************	RESULT OF ANAESTHESIA.		
	Deform'd Not Reduced. Reduced	Saccess- III Death	No of Age of Presentation. Sex of Ho Noted Actional Ergot Leads	REMARKS AND EXPLANATORY NOTES.

From the County of _____ for the Month of_____

1859.

DISEASES, ACCIDENTS, &c | HAFFLOT ENFITAIS | SEX | COLOR: CIVIL CONDITION. | PLACE OF BIETH | SEX | PAPILINI | Male | Female | Winter | Black | Single | Married | Widowed | OCCUPATION. | PLACE OF BIETH | SEX | Disease. | Record | Disease. | Disease. | Record | Disease. | Record | Disease. | Record | Disea

Registered by

M. D., Residence,__

-	RESULT OF ACCIDENTS.			
	Deform'd Not Pronted Not Reduced	Success III Death.	No of Age of Presentation. Child Lieb No all Artificial Ergot Us J	REMARKS AND EXPLANATORY NOTES.
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From the County of.

for the Month of_

..1859.

DISEASES, ACCIDENTS, &c DATE OF ENTERING Made Female Waite, Black, Single Married Widowed OCCUPATION. PLACE OF BIRTH E Disease, Record Died.

Registered by

M. D., Residence,__

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	RESULT OF ACCIDEN	TS.	RESULT	OF ANAE	ESTHESIA.			OB	STETRIC.	AL RUCC	ORD.				
-	Deform'd Not Reduced.	Not Roduced	Success-	III Datests	Death.	No of Pregn'cy	Age of Patient	Presen- tailon.	Sex of Cald	lion	. '		Art head.	Ergot Used?	REMARKS AND EXPLANATORY NOTES.
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Registered by

M. D., Residence.

RESULT OF ACCIDENTS.

Deform'd Not Deform'd Not Reduced, Roduced Record on Likeds Death.

RESULT of ANAESTHESIA DOBSTETRICAL RECORD.

No of Age of Presentiation. Sex of Line Not Not Likeds Death. Pregn'cy Patient Likeds Likeds

From the County of.

__for the Month of_

..1859.

DISEASES, ACCIDENTS, &c | DATE OF ENTRAL VALUE | SEX | COLOR | CIVIL CONDITION | COUPATION | PLACE OF BIRTH | 2 | 2 | 2 | Disease | Record | Died

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		RESULT OF ANAESTHESIA	OBSTETRICAL RECORD	
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From the County of_

for the Month of

...1859.

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From the County of.

for the Month of_

1859.

DISEASES, ACCIDENTS, &c ATTACK, PATILIAN Male, Female Wante, Black Single Married Wishowed OCCUPATION.

SEX. COLOR. CIVIL CONDETION.

OCCUPATION. PLACE OF BIRTH To Disease, Record Died

= 1	RESULT	OF ACCIDEN	TS.	RESULT	OF ANAES	STHESIA.	1	OB	STETRIC	AL RECO	RD.			1	
De	form'd Not Deform	d Reduced.	Not Rouged	Success-	Diects	Death.	No of Age of Pregn'cy Patient	Presen-	Sex of Could	lion	Α.	d. Ai	re heral.	Ergot Usul'	REMARKS AND EXPLANATORY NOTES
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From the County of for the Month of 1859.

DISEASES, ACCIDENTS, &c PAPTION OF Male Pemale Winte Black Single Married Wildowed OCCUPATION. PLACE OF BIRTH To Distance. Record Died

Registered by M. D., Residence,__

RESULT OF ACCIDENTS.	RESULT OF ANAESTHESIA.	OBSTETRICAL RECORD.	
Deform'd Not Beauced, Not Routee	Saccess- Ill Death.	No of Age of Presentation. Sex of Hour No oth Arthera E	REMARKS AND EXPLANATORY NOTES.
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From the County of ________ for the Month of _______ 1859.

DISEASES, ACCIDENTS, &c. | DATE OF ENTIALS ACTOON | Manne Female White. | Black. | Single Married Wishowed | OCCUPATION. | PLACE OF BIRTH | SEC. | Designer Recoved | Disease | Recoved |

Registered by M. D., Residence,

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	RESULT OF	ACCIDENTS.	RESULT	OF ANAESTHE	ESIA.		OB	STETRIC.	AL RECO	RD		
	Deform'd Not Deform'd		Success-	Ill De	ath.	No of Age of Pregn'cy Patient	Presen-			1.		REMARKS AND EXPLANATORY NOTES.

From the County of_

for the Month of

.1859.

Registered by

M. D., Residence.

H	RESULT OF ACCIDENTS.	RESULT OF ANAESTHESIA.	OBSTETRICAL RECORD	
1	Deform'd Not Reduced. Reduced	Sacress- Ill Death.	No of Age of Present Sex of Ro 1 No. 1 Araneod. Ergot Pregnicy Patient tation. Child La No. 1 Araneod. Lord?	REMARKS AND EXPLANATORY NOTES:
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Registered by.....

M. D., Residence,_

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1		RESULT	OF ANAESTHESIA.		OBSTETRICA	L RECORD			
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DISEASES, ACCIDENTS, &c	DATE OF AFFACE	ENHALS PATILAT	VGE	SE.	X Female	Winte.	OR. Black.	CIVI Single.	Married	PION.	OCCUPATION.	PLACE OF BIRTH	l - de la	Average Datable D. Seuse	TERMINATION Died

Registered by

M. D., Residence.

RESULT OF ACCIDENTS.

Deform'd Not Reduced Not Reduced Reduced

From the County of.

__for the Month of_

..1859.

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Registered by M. D., Residence,

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	RESULT OF ACCIDENTS.	RESULT OF ANAESTHESIA.	OBSTETRICAL RECORD	
	Deform'd Reduced ! Reduced	Success- Ill Death.	No of Pregn'ey Patient tation Sex of Fig. 1 V 1 Archemb Erget Used	REMARKS AND EXPLANATORY NOTES.
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Registered by.....

M. D., Residence,__

RESULT OF ACCIDENTS.	RESULT OF ANAESTHESIA.	OBSTETRICAL RECORD.	
Deform'd Not Reduced Resourced	Siecess Ill Death.	No of Age of Presentation. Child Late N Art field. Used?	REMARKS AND EXPLANATORY NOTES.
	1)		

From the County of_

for the Month of_

1859.

DISEASES, ACCIDENTS, &C. DATE OF EACH PATTLEY.

Male Female Winte, Black, Single Married Widowed OCCUPATION.

PLACE OF BIRTH To Decision Brown Record Died

Registered by

M. D., Residence,__

	RESULT OF ACCU	IDENTS. LI	RESULT of	ANAESTHESIA.	OE	STETRICAL RECORD		
l	Deform'd Not Deform'd Perca	need. Not	Saccess-	Elects Death.	No of Age of Presen- Pregn'ey Patient tailon.	Sex et Hor V	Arthern Ergot	REMARKS AND EXPLANATORY NOTES.
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From the County of_

__for the Month of_

..1859.

DISEASES, ACCIDENTS, &c DVIII OI LATERALY VALUE AND ACCIDENTS. &c DVIII

Registered by

M. D., Residence.

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100	Deform'd Not Reduced. Not Reduced	Success- III Death.	No of Age of Presentation. Sex of Iou No Art head	REMARKS AND EXPLANATORY NOTES.
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From the County of

for the Month of

...1859.

DISEASES, ACCIDENTS, &c ACCIDE

Registered by

M. D., Residence.

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From the County of_

for the Month of_

.1859.

Registered by M. D., Residence,_

	RE	SULT OF	ACCIDEN	TS.	RESULT	OF ANAES	STHESIA.	9		OB	STETRIC	AL RECO	RD.			
								No. of Pregn'cy	Age of Patient.	Presen-	Sex of Child.	Hours in Labor.	Natural.	Artificial	Ergot Used?	REMARKS AND EXPLANATORY NOTES.
-	-		-		,		-	11						1		



